## Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>4-24-08</u>	Address:	OAK SOUTH OF TYLER	
Case #:	24-29204		PLYMOUTH, IN	
County:	MARSHALL			
Type of Laboratory Scizure (check one)  Operational Lab Chemical/Glassware/Equipment (only) Dumpsite (only)		Scizure Location (c Residence Outbuilding	☐ Hotel/Motel ☐ Open No Structure	
	nd: Location (bedroom, kitchen, open ai	☐ Vehicle	Other:	
(check all the Lithium	oat apply) n/Ammonia Reaction(s):			
Red Phosphorous/Iodine Reaction(s):				
Flammable Solvents:				
Water Reactive Metal (Lithium):				
Anhydrous Ammonia:				
Hydrochloric Acid Gas Generator(s): OPEN AIR				
Corrosive Acid: OPEN AIR				
Corrosive Base:				
Other (item and location):				
Child under age 18 discovered (check one)  Yes (number present)  No  *If yes, fax report to Child Protective Services		Investigative Information  Ephodrine/Pseudocphodrine Tracking Log  Retail/Merchant Tip  Other:		
This report	is to be faxed to the following agen	<u>cies that serve the lo</u>	cation;	
Health Depa	ment: <u>LAPAZ FIRE</u> artment: <u>MARSHALL CO.</u> ction Service: <u>N/A</u>	Fax: <u>784-2460</u> Fax: <u>(574) 936-9247</u> Fax:		
For further information regarding this methamphetamine laboratory, contact Investigating Officer: <u>JASON FAULSTICH</u> Phone <u>1-800-552-2959</u>				

This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.

This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.